

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		10	12-10-01
FORMALITY REVIEW	TB	JC 1168	12-13-01
RESPONSE FORMALITY REVIEW	HL	70	03-15-03

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

BEST AVAILABLE COPY

Claim	Date
Final Original	
10	1
11	2
12	3
13	4
14	5
15	6
16	7
17	8
18	9
19	10
20	11
21	12
22	13
23	14
24	15
25	16
26	17
27	18
28	19
29	20
30	21
31	22
32	23
33	24
34	25
35	26
36	27
37	28
38	29
39	30
40	31
41	32
42	33
43	34
44	35
45	36
46	37
47	38
48	39
49	40
50	41

Claim	Date
Final Original	
51	1
52	2
53	3
54	4
55	5
56	6
57	7
58	8
59	9
60	10
61	11
62	12
63	13
64	14
65	15
66	16
67	17
68	18
69	19
70	20
71	21
72	22
73	23
74	24
75	25
76	26
77	27
78	28
79	29
80	30
81	31
82	32
83	33
84	34
85	35
86	36
87	37
88	38
89	39
90	40
91	41
92	42
93	43
94	44
95	45
96	46
97	47
98	48
99	49
100	50

Claim	Date
Final Original	
101	1
102	2
103	3
104	4
105	5
106	6
107	7
108	8
109	9
110	10
111	11
112	12
113	13
114	14
115	15
116	16
117	17
118	18
119	19
120	20
121	21
122	22
123	23
124	24
125	25
126	26
127	27
128	28
129	29
130	30
131	31
132	32
133	33
134	34
135	35
136	36
137	37
138	38
139	39
140	40
141	41
142	42
143	43
144	44
145	45
146	46
147	47
148	48
149	49
150	50

If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)

7AP (1110)  
3/12/02

828  
12/13